

**U.S. Department of Justice  
United States Marshals Service**

**PROCESS RECEIPT AND RETURN**  
*See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form*

1

**PLAINTIFF**  
**UNITED STATES OF AMERICA**

**DEFENDANT**  
**JAMIE ALLEN HUTTO**

**RECEIVED**

**COURT CASE NUMBER**  
**1:05CR265-C**

**TYPE OF PROCESS**  
**FINAL ORDER OF FORFEITURE**

**SERVE****AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
**ONE REMINGTON, MODEL 870, 12 GAUGE SHOTGUN, S/N D601314A**

ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)  
**c/o USMS**

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Number of process to be served with this Form - 285

1

John T. Harmon  
United States Attorney's Office  
Assistant United States Attorney  
Post Office Box 197  
Montgomery, Alabama 36101-0197

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

CATS # 06-DEA-470304

Signature of Attorney or other Originator requesting service on behalf of : <i>J.T.H.</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (334) 223-7280	DATE 07/20/06
--	---	------------------------------------	------------------

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>2</u>	District to Serve No. <u>2</u>	Signature of Authorized USMS Deputy or Clerk <i>K. Chavers</i>	Date <u>7/22/06</u>
---	----------------------------	------------------------------------	-----------------------------------	---	------------------------

I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
---	---

Address (complete only if different than shown above)	Date of Service <u>8/1/06</u>	Time <u>2:00</u> <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
---	----------------------------------	---

Service Fee <u>45.00</u>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges <u>45.00</u>	Advance Deposits	Amount Owed to US Marshal or	Amount or Refund
-----------------------------	---	----------------	-------------------------------	------------------	------------------------------	------------------

REMARKS:

**RETURNED AND FILED**

AUG - 2 2006